Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

EFS ID:

12072

Application ID:

09682233

INTEGRATED CIRCUIT PHASE

Title of Invention:

PARTITIONED POWER
DISTRIBUTION FOR STRESS

POWER REDUCTION

First Named Inventor:

Kerry Bernstein

Domestic/Foreign Application:

Domestic Application

Filing Date:

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Effective Receipt Date:

2001-08-08

Submission Type:

Utility Patent Filing

Filing Type:

new-utility

Confirmation Number:

0

Attorney Docket Number:

BUR920010042

cn=Robert A. Walsh, ou=Registered Attorneys, ou=Patent and

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Total Fees Authorized:

\$1206.0

Payment Category:

DA - **Deposit Account**

Deposit Account Number:

90456

Deposit Account Name:

Richard A. Henkler

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: BUR920010042

INTEGRATED CIRCUIT PHASE PARTITIONED POWER DISTRIBUTION FOR STRESS POWER REDUCTION

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Registration Number:

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A. Henkler

Date Signed: 20010808

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Attached Files:

specification

BUR920010042US1.xml

declaration

0042 Dec.1.tif

declaration

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declaration

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declaration

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Comments:

ASSIGNEE: INTERNATIONAL BUSINESS MACHINES CORPORATION ASSIGNEE ADDRESS: ARMONK, NEW YORK 10504

Docket No. BUR920010042US1

Declaration and Power of Attorney For Patent Application English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

INTEGRATED CIRCUIT PHASE PARTITIONED POWER DISTRIBUTION FOR STRESS POWER REDUCTION

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| hereby including | state that I have reviewed and ι the claims, as amended by any | understand the contents of the above i amendment referred to above. | dentified specification |
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| Prior For | eign Application(s) | | Priority Not Claimed |
| (Number) | (Country) | (Day Maryla Nov. Ett. 1) | |
| (Indiliber) | (Country) | (Day/Month/Year Filed) | |
| (Number) | (Country) | (Day/Month/Year Filed) | J |
| (Number) | (Country) | (Day/Month/Year Filed) | |
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| application(s) listed below: | | |
|---|---|--|
| (Application Serial No.) | (Filing Date) | _ |
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| name of the state | and daily to discisse to the | United States Patent and Trademar |
| Office all information known to me | e to be material to patental e between the filing date of | United States Patent and Trademar bility as defined in Title 37, C. F. R f the prior application and the national (Status) (patented, pending, abandoned) |
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

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Sole or first inventor's signature

Date

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| Sixth inventor's signature | Date |
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FEE TRANSMITTAL

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TOTAL FEES AUTHORIZED: \$ 1206

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SUBMITTED BY

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Authorized Name:

Richard A. Henkler

Electronic Signature Mark:

Richard A. Henkler /s/

Date Signed:

20010808

BASIC FILING FEE

| Fee Description | Fee Code | Fee Paid |
|--------------------|----------|----------|
| Utility Filing Fee | 101 | \$ 710 |

Subtotal For Basic Filing Fee: \$ 710

EXTRA CLAIM FEES

| | Fee Code | Fee | Extra Claims | Fee Paid |
|-----------------------|----------|-------|--------------|----------|
| Total Claims: 32 | 103 | \$ 18 | 12 | \$ 216 |
| Independent Claims: 6 | 102 | \$ 80 | 3 | \$ 240 |

Subtotal For Extra Claims Fees: \$ 456

ADDITIONAL FEES

| Fee Description | Fee Code | Fee Paid |
|---|----------|----------|
| Recording Each Patent Assignment Per Property Fee | 581 | \$ 40 |

Subtotal For Additional Fees: \$ 40